



DOCKET NO. AZ-0017-USA-NP

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: FRANK JAO et al

Serial No.: 10/628,970

Art Unit: NOT YET ASSIGNED

Filed : July 28, 2003

Examiner: NOT YET ASSIGNED

For : FORMULATIONS AND DOSAGE FORMS FOR CONTROLLED DELIVERY OF  
TOPIRAMAET

I hereby certify that this correspondence is being deposited with the  
United States Postal Service as first class mail in an envelope addressed  
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Alexandria, VA 22313-1450 on

January 20, 2004

(Date of Deposit)

MARY A. APPOLLINA

(Name of applicant, assignee, or Registered Representative)

(Signature)

January 20, 2004

(Date of Signature)

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P.O. Box 1450  
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SUBMISSION OF COMBINED DECLARATION AND POWER OF ATTORNEY

Dear Sir:

Pursuant to Rule 53(f) and Rule 54, please find enclosed a Combined Declaration and Power of Attorney for the application of Frank Jao et al entitled Formulations and Dosage Forms for Controlled Delivery of Topiramate attorney Docket No. AZ-0017-USA-NP, to complete, pursuant to Rule 51, this application filed on July 28, 2003 by Express Mail pursuant to Rule 10. As required, a copy of the Notice to File Missing Parts of Application is also attached.

Please charge Johnson & Johnson Deposit Account No. 10-0750/AZ-0017-USA-NP/MAA in the amounts of \$130.00 for submission of the Declaration pursuant to Section 1.16(e). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 10-0750/AZ-0017-USA-NP/MAA. This sheet is submitted in triplicate.

Respectfully submitted,

MARY A. APPOLLINA

Reg. No. 34,087

Attorney for Applicant(s)

Johnson & Johnson  
One Johnson & Johnson Plaza  
New Brunswick, NJ 08933-7003  
(732) 524-3742



Please type a plus sign (+) inside this box ☐

PTO/SB/01 (10-00)  
Approved for use through 10/31/2002. OMB 0651-0032  
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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing <b>OR</b> <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)	Attorney Docket Number	AZ0017USANP
	First Named Inventor	Frank JAO
	<b>COMPLETE IF KNOWN</b>	
	Application Number	10/628,970
	Filing Date	July 28, 2003
	Group Art Unit	Not yet assigned
	Examiner Name	Not yet assigned

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

### FORMULATIONS AND DOSAGE FORMS FOR CONTROLLED DELIVERY OF TOPIRAMATE

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☐ was filed on 07/28/2003 as United States Application Number or PCT International Application Number  
10/628,970 and was amended on (MM/DD/YYYY) ☐

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.



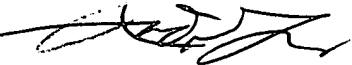
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

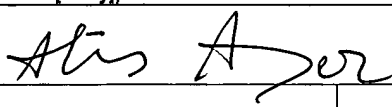
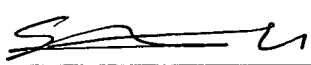
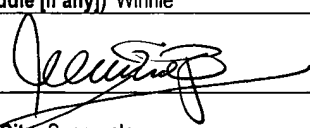
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES      NO
			<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION - Utility or Design Patent Application		
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.		
<b>Application Number(s)</b>	<b>Filing Date (MM/DD/YYYY)</b>	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/399,993 60/468,519	07/29/02 05/07/03	
I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:		
<b>Application Serial No.</b>	<b>Filing Date</b>	<b>Status</b>
I hereby appoint:		
<input checked="" type="checkbox"/> Practitioners at Customer Number <span style="border: 1px solid black; padding: 2px 10px;">27777</span> →		
AND		
<input type="checkbox"/> Practitioner(s) named below: <div style="display: flex; justify-content: space-between;"> <span><u>Name</u></span> <span><u>Registration Number</u></span> </div>		
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.		
Address all telephone calls Mary A. Appollina at telephone number (732) 524-3742		
<div style="text-align: right; margin-bottom: 5px;">Customer Number</div> Direct all correspondence to: <input checked="" type="checkbox"/> or Bar Co de Label <span style="border: 1px solid black; padding: 2px 10px;">27777</span> OR <input type="checkbox"/> Correspondence address below		
Name:		
Address:		
Address:		
City:	State:	ZIP
Country	Telephone:	Fax:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Frank		Family Name or Surname Jao	
Inventor's Signature <i>Frank Jao</i>		Date <i>1/05/04</i>	
Residence: City San Jose	State CA	Country USA	Citizenship USA
Mailing Address 5260 Arezzo Drive			
City San Jose	State CA	ZIP 95138	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) David		Family Name or Surname Edgren	
Inventor's Signature <i>David Edgren</i>		Date <i>12-22-03</i>	
Residence: City Los Altos	State CA	Country USA	Citizenship USA
Mailing Address 277 N. Avalon Drive			
City Los Altos	State CA	ZIP 94022	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Patrick S.L.		Family Name or Surname Wong	
Inventor's Signature <i>Patrick S.L. Wong</i>		Date <i>12-24-03</i>	
Residence: City Burlingame	State CA	Country USA	Citizenship USA
Mailing Address 1533 Burlingame Avenue			
City Burlingame	State CA	ZIP 94010	Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Robert		Family Name or Surname Skluzacek	
Inventor's Signature 		Date 1/7/2004	
Residence: City Newark	State CA	Country USA	Citizenship USA
Mailing Address 6053 Bennington Drive			
City Newark	State CA	ZIP 94560	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Shu		Family Name or Surname Li	
Inventor's Signature 		Date 1/6/2004	
Residence: City Union City	State CA	Country USA	Citizenship USA
Mailing Address 33739 Heritage Way			
City Union City	State CA	ZIP 94587	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SIXTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Andrew		Family Name or Surname Lam	
Inventor's Signature 		Date 1/9/04	
Residence: City South San Francisco	State CA	Country USA	Citizenship USA
Mailing Address 56 Baypark Circle			
City South San Francisco	State CA	ZIP 94080	Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SEVENTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Atul		Family Name or Surname Ayer	
Inventor's Signature 		Date 12-23-2003	
Residence: City Palo Alto	State CA	Country USA	Citizenship USA
Mailing Address 931 Bautista Court			
City Palo Alto	State CA	ZIP 94303	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF EIGHTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Shaoling		Family Name or Surname Li	
Inventor's Signature 		Date 1/12/2004	
Residence: City Sunnyvale	State CA	Country USA	Citizenship Peoples Republic of China
Mailing Address 793 Mahogany Lane			
City Sunnyvale	State CA	ZIP 94086	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF NINTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Winnie		Family Name or Surname To	
Inventor's Signature 		Date 12/23/03	
Residence: City Sunnyvale	State CA	Country USA	Citizenship United Kingdom
Mailing Address 589 Maple Avenue			
City Sunnyvale	State CA	ZIP 94043	Country USA